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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number		250445.00002		
		First Named Inve	First Named Inventor		r	
		CON	COMPLETE IF KNOWN			
		Application Numb	er			
✓ Declaration	Declaration Submitted after Initial	Filing Date	Here	Herewith		
Submitted OR		Art Unit				
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Examiner Name				
	Examine Name					
I hereby declare that:						
Each inventor's residence, mailing						
I believe the inventor(s) named belo patent is sought on the invention er		first inventor(s) of the su	bject matter	which is claimed and	d for which a	
Omnidirectional Ante	enna for Wireless Co	mmunication with I	mplanted	Medical Devices		
	(Title of the	Invention)				
the specification of which	(,				
is attached hereto						
was filed on (MM/DD/YYYY)	OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International					
was filed on (Minibal) 1111)						
Application Number	and was amended on (MM/DD/YYYY) (if applicable).			(if applicable).		
I hereby state that I have reviewed	and understand the conte	ents of the above identif	ied specifica	ation, including the cla	aims, as	
amended by any amendment spec	ifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or						
PCT international filing date of the continuation-in-part application.						
or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for						
patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claim		ppy Attached? NO	
		,				
]				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
[Page 1 of 2]						

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	ustomer Nui	mber 26	6710		OR 🔲 (Correspondence address below
Name						
Address						
Address						
City				State	:	ZIP
Country			e			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor				ed for this unsigned inventor		
Given Name Stephen			Family Name Denker or Surname			
Inventor's Sh Nuchur Date Date						
Residence: City Mequon State WI			C	USA Country	Citizenship USA	
Mailing Address 2130 West Columbia Drive						
Mailing Address						
City Mequon	State WI		ZIP 53092		Country USA	
NAME OF SECOND INVENTOR: A petition has been filed for this unsign						
			Family Name Beutler or Surname			
Inventor's Cent Seuth South Bate 700?						
Residence: City Greendate			State WI		Country	USA Citizenship
Mailing Address 5890 Fleming Court						
Mailing Address						
City Greendale	State WI		ZIP 53129		USA	
Additional inventors are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						

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U.S. Patent and Tr	(06-03) Approved for use through 11/30/2005. OMB 0651-0035 ademark Office; U.S. DEPARTMENT OF COMMERCE ormation unless it displays a valid OMB control number.
Application Number	
Filing Date	Herewith
First Named Inventor	Stephen Denker
Title	Omnidirectional Antenna for
Art Unit	
Examiner Name	
Attorney Docket Number	250445 00002

I hereby appoint:			 -	
✔ Practitioners at Customer Number:	er Number: 26710			
OR				
Practitioner(s) named below:				
Name			Registration N	Jumber
		· · · · · · · · · · · · · · · · · · ·		
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Telephone		Fax		
I am the: Applicant/Inventor.				
Assignee of record of the entire in	torost See 37 CER 3 71			
Statement under 37 CFR 3.73(b) ii		1		
SIGNATURE of Applicant or Assignee of Record				
Name Stephen Denker				
Signature Sh / Lunhur				
Date Sy 1 8	2003		Telephone	262-241-0404
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
*Total of forms are submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. 5456604.1

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| Application Number |

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	
Filing Date	Herewith
First Named Inventor	Stephen Denker
Title	Omnidirectional Antenna for
Art Unit	
Examiner Name	
Attorney Docket Number	250445.00002

I hereby appoint:				
Practitioners at Customer Number:	26710			
OR		- Area - Attach	J	
Practitioner(s) named below:				
Name			Registration Number	

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Individual Name				
Address				
Address		I Chara I		
City		State	Zip	
Country Telephone		Fax		
I am the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Name Arthur J. Beutler / +1				
Signature (Lith) Device				
Date 8 July 421-3363				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total of forms are submitted.				

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